



Planet Gymnastics

Olympic Summer Camps 2018

June 11-14, 2018

Girls of all levels from beginner to elite. New skills or learn routines. You will get the best experience

4 In-ground
Trampolines
2 Full Floors
Strap Bar & Pit Bar
Resi & Foams Pits
Inspirational Lectures



100ft Tumble Track
14 Balance Beams
Dance Studio
Arts & Crafts
Goal Planning

**Featuring
World/Olympic Gold Medalist & USA National Staff,
Vladimir Novikov
&
Special Guests**

**Previously World Champion Coaches included Artur Akopyan, Igor Korobchinski,
Elena Piskun, Lilya Podkapayeva, Svetlana Boguiskaya**

Coaching staff is the best caliber you will find anywhere! Coaches to State, Regional & National Champions. Commuter camp only \$520. Planet gymnasts receive a \$50 discount (\$470) Call if you need accommodated overnight. Deposit of \$100 due by April 1st. Remaining payment due June 1st. 5 yrs & up. Cancellation fee is \$30. Lunch and snacks provided. Registration starts 8:30am on Monday, 9am-3.30pm Mon-Wed, and camp ends on Thursday at 12 noon with exhibition at 11am. After-camp activities include open gym Tuesday 6-7.30pm (\$10), and lock-in Wednesday after 3.30pm practice, (\$30) with dinner & breakfast provided. Credit card, check or cash accepted. Mail payment to our PO Box below or call.

Level 1's have the option to do a half day of camp! Monday-Thursday 9:00am-12:30pm (Thursday ending at 12:00) It costs \$220. You can also add any of the after camp activities!
We are just over an hour away from Florida beaches and the Gulf of Mexico.

Planet Gymnastics, PO Box 850602, Mobile, AL 36685. Located at 900 Schillinger Rd S. in Mobile, near Target.
Phone (251) 650-0699 Fax (251) 639-9250 Email: PlanetGymnasticsAL@comcast.net Website: www.PlanetGymnastics.com



Registration Form for Planet Gymnastics Olympic Gymnastics Summer Camp

Name of camper _____

Age & Birthday _____

Address _____

Parents name _____ Phone numbers (incl. cell) _____

Parents name _____ Phone numbers (incl. cell) _____

Medical conditions or medication details _____

Gym _____ Do you need accommodation? _____

Level - Girls USA level _____ or class level beginner / intermediate / advanced (circle one)

Tuesday open gym (\$10) _____ Wednesday lock-in (\$30) _____

Camp Package: leo, shorts & tee - \$55 _____ **ORDER placed May 1st**

Girls Sizes: CS CM CL AXS AS AM AL

By signing the liability waiver , you authorize Planet Gymnastics Inc. to act on your behalf in any medical emergency.

WARNING!!!

In consideration for the use of services, facilities, or equipment provided by Planet Gymnastics, the participant hereby releases Planet Gymnastics Inc., its subsidiaries, affiliates, partners, officers, directors, employees, agents and volunteers (and each of their respective heirs, assigns, and legal representatives), on behalf of the participant or his or her heirs, assigns, and legal representatives, from any and all liability for negligence, bodily injuries, death or property damage to participant, arising out of participant's use of, or presence upon property, or services of Planet Gymnastics Inc.

The participant at Planet Gymnastics understands, acknowledges, and agrees that acrobatics, gymnastics, tumbling and trampoline are dangerous activities, and those activities can result in injury to the person or damage to the property or to third parties, and the participant is fully aware of the risks inherent in engaging in or observing any activity at or provided by Planet Gymnastics, no matter how careful the participants and staff, no matter what safety equipment is worn, the risk cannot be eliminated. Risk can be reduced by never eliminated.

The risk of injury includes minor injuries such as bruises, and more serious injuries such as broken bones, dislocations, and muscle pulls. The risks include catastrophic injuries such as permanent paralysis or death. These can occur from landings or falls on the back, neck, or head and other such occurrences. The participant may suffer such injuries while merely observing or being in the proximity to our activities as other participants may collide, land, or fall upon you. The participant is aware of the conditions of the facilities and that conditions may become more dangerous during the time the participant is using the premises. The participant voluntarily assumes all risk of loss, damage, or injury while on the premises. The participant acknowledges that there are various degrees of skill and experience required for the different activities and the participant will abide by the rules for the use of the various activities, including wearing all of the protective gear and equipment that is required for participation and will follow instructions of staff members. Failure to follow rules and instructions from staff may result in termination of participation in activities without refund.

The participant agrees to indemnify Planet Gymnastics Inc. against, and save it harmless from, any and all damages, actions, claims, judgments, costs of litigation and attorney fees which may result from the participants use of or presence upon the property or facilities or services of Planet Gymnastics, including damage to the equipment of Planet Gymnastics, or lessor's property.

I hereby authorize Planet Gymnastics to act for me according to their best judgment in any emergency requiring medical attention. All medical expenses incurred will be the responsibility of the participant or participant's family. I certify to Planet Gymnastics Inc. that I have no physical condition or mental impairment that would be affected by participation in activities of Planet Gymnastics. I permit Planet Gymnastics to use any photographs, videotapes, motion picture recordings, or any other record taken while I am on the premises of Planet Gymnastics, or engaged in any activity or event sponsored, promoted, or organized by Planet Gymnastics for publicity, advertising, or any legitimate purpose.

By signing this waiver and assumption of risk and release, I acknowledge that I have read the above release and fully understand its contents. I agree to be bound by the terms of the release and understand that any and all risks, whether known or unknown, are expressly waived in advance. I certify that the participant is covered by insurance to cover any injury or damages I may suffer or cause, or else I agree to bear the costs for such injury or damage to myself or others.

PARENT OR LEGAL GUARDIAN MUST SIGN IF PARTICIPANT IS UNDER THE AGE OF 19.

Signature of parent/legal guardian _____ Date _____

Print name of parent/legal guardian _____ Relationship to participant _____

Witness _____ Date _____

OFFICE USE:

Payment - Amount _____ Type incl. check # _____ Front desk – Initial & date _____

Payment - Amount _____ Type incl. check # _____ Front desk – Initial & date _____